

## PART B - FEE(S) TRANSMITTAL

Complete and send this form, together with applicable fee(s), to: **Mail** Mail Stop ISSUE FEE  
 Commissioner for Patents  
 P.O. Box 1450  
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INSTRUCTIONS: This form should be used for transmitting the ISSUE FEE and PUBLICATION FEE (if required). Blocks 1 through 5 should be completed where appropriate. All further correspondence including the Patent, advance orders and notification of maintenance fees will be mailed to the current correspondence address as indicated below or directed otherwise in Block 1, by (a) specifying a new correspondence address; and/or (b) indicating a separate "FEE ADDRESS" for maintenance fee notifications.

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23622 7590 04/27/2006

RICHARD I. SAMUEL, ESQ.  
 GOODWIN PROCTER, LLP  
 399 LEXINGTON AVE.  
 NEW YORK, NY 10022

**Certificate of Mailing or Transmission**  
 I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO (571) 273-2885, on the date indicated below.

(Depositor's name)
(Signature)
(Date)

07/07/2006 HDESS2 00000041 060923 09587574

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APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
09/587,574	06/05/2000	Jurgen Behrens	103701-402-NP	7952

TITLE OF INVENTION: CONDUCTIN PROTEIN AND A RELATED AGENT FOR DIAGNOSING AND TREATING TUMOR ILLNESSES

APPLN. TYPE	SMALL ENTITY	ISSUE FEE	PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	YES	\$700	\$0	\$700	07/27/2006
EXAMINER	ART UNIT	CLASS-SUBCLASS			
YU, MISOOK	1642	530-350000			

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).

- ☐ Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.  
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2. For printing on the patent front page, list

- (1) the names of up to 3 registered patent attorneys or agents OR, alternatively,  
 (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.

1. Goodwin Procter, LLP.  
 2. \_\_\_\_\_  
 3. \_\_\_\_\_

3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

(B) RESIDENCE: (CITY and STATE OR COUNTRY)

Max-Deibrock Institut für Molekulare Medizin Berlin, Germany

Please check the appropriate assignee category or categories (will not be printed on the patent): ☐ Individual ☐ Corporation or other private group entity ☐ Government

4a. The following fee(s) are enclosed:

- ☒ Issue Fee  
☐ Publication Fee (No small entity discount permitted)  
☐ Advance Order - # of Copies \_\_\_\_\_

4b. Payment of Fee(s):

- ☐ A check in the amount of the fee(s) is enclosed.  
☐ Payment by credit card. Form PTO-2038 is attached.  
☒ The Director is hereby authorized by charge the required fee(s), or credit any overpayment, to Deposit Account Number 06-0923 (enclose an extra copy of this form).

5. Change in Entity Status (from status indicated above)

- ☐ a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27. ☐ b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2).

The Director of the USPTO is requested to apply the Issue Fee and Publication Fee (if any) or to re-apply any previously paid issue fee to the application identified above. NOTE: The Issue Fee and Publication Fee (if required) will not be accepted from anyone other than the applicant, a registered attorney or agent, or the assignee or other party in interest as shown by the records of the United States Patent and Trademark Office.

Authorized Signature

Typed or printed name

Richard I. Samuel

Date

Registration No.

7/7/06

24,435

This collection of information is required by 37 CFR 1.311. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, Virginia 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, Virginia 22313-1450.

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GOODWIN PROCTER

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**CERTIFICATE OF TRANSMISSION/MAILING**

I hereby certify that this correspondence, and attachments if any, is being facsimile transmitted to the attention of Mail Stop Issue Fee of the U.S. Patent and Trademark Office at the following fax number (571) 273-2885 on April 10, 2006.

*Judith M. Gordon-Michel*  
Judith M. Gordon-Michel  
Date July 7, 2006

**F A X T R A N S M I T T A L**

If problems with transmittal, call fax department at 212.813.8800.

Date	Total pages
July 7, 2006	3

To	Company	Fax number	Telephone
Commissioner for Patents Attn: Mail Stop Issue Fee	U.S. Patent and Trademark Office	(571) 273-2885	

From	Fax number	Telephone
Richard I. Samuel	212.355.3333	212.459.7021

**Message:**

**Appl. No.** : 09/587,574  
**Applicant** : Jurgen Behrens et al.  
**Filed** : 6/05/2000  
**Title** : CONDUCTINE PROTEIN AND A RELATED AGENT FOR  
DIAGONOSING AND TREATING TUMOR ILLNESSES  
**TC/A.U.** : 1642  
**Examiner** : Yu, Misook  
**Docket No.** : 103701-402-NP

Submitted herewith are the following items for filing in the above-identified case:

1. This Fax Transmittal (1 page); and
2. Issue fee Transmittal (in duplicate) (2 pages)

For a total of 3 pages.

The Commissioner is authorized to charge any required fees (the \$800 issue fee, for a total of \$800), including any extension and/or excess claim fees, any additional fees, or credit any overpayment, to Goodwin Procter LLP Deposit Account No. 06-0923.

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